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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 10/622,076		Filing Date 07/17/2003		To be Mailed	
APPLICATION AS FILED – PART I (Column 1) (Column 2)							SMALL ENTITY 🛛			OTHER THAN OR SMALL ENTITY		
	FOR	N	NUMBER FILED		NUMBER EXTRA		RATE (\$)	FEE (\$)		RATE (\$)	FEE (\$)	
	BASIC FEE (37 CFR 1.16(a), (b),	or (c))	N/A		N/A		N/A			N/A		
	SEARCH FEE (37 CFR 1.16(k), (i),		N/A		N/A		N/A			N/A		
	EXAMINATION FE (37 CFR 1.16(o), (p),	ΕE	N/A		N/A		N/A		1	N/A		
	TAL CLAIMS CFR 1.16(I))		minus 20 =		*		x \$ =		OR	X \$ =		
	EPENDENT CLAIN CFR 1,16(h))	1S	minus 3 =		*		x \$ =			x \$ =		
	APPLICATION SIZE (37 CFR 1.16(s))	shee is \$2 addit	If the specification and of sheets of paper, the app is \$250 (\$125 for small additional 50 sheets or t 35 U.S.C. 41(a)(1)(G) a		oplication size fee due Il entity) for each r fraction thereof. See							
Ш	MULTIPLE DEPEN	NDENT CLAIM PR	7 CFR 1.16(j))	J			1					
* If the difference in column 1 is less than zero, enter "0" in column 2.							TOTAL			TOTAL		
APPLICATION AS AMENDED - PART II (Column 1) (Column 2) (Column 3)						•	SMALL ENTITY			OTHER THAN SMALL ENTITY		
AMENDMENT	09/04/2009	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1.16(i))	* 33	Minus	** 53	= 0	J	X \$26 =	0	OR	x \$ =		
	Independent (37 CFR 1.16(h))	* 7	Minus	***7	= 0]	X \$110 =	0	OR	x \$ =		
	Application Size Fee (37 CFR 1.16(s))											
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR			
							TOTAL ADD'L FEE	0	OR	TOTAL ADD'L FEE		
		(Column 1)		(Column 2)	(Column 3)							
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1.16(i))	*	Minus	**	=		x \$ =		OR	x \$ =		
	Independent (37 CFR 1.16(h))	*	Minus	***	=]	x \$ =		OR	x \$ =		
	Application Size Fee (37 CFR 1.16(s))											
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR			
							TOTAL ADD' L FEE		OR	TOTAL ADD'L FEE		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												

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